

Fill in this information to identify your case:

Debtor 1	KRYSTAL	J.	JOHNSON
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>DISTRICT OF NEVADA</u>			
Case number (if known)	<u>20-50784</u>		

Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

No. Go to Part 2.
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.

Total claim	Priority amount	Nonpriority amount
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2.1

Priority Creditor's Name

Last 4 digits of account number _____

Number Street

When was the debt incurred? _____

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Who incurred the debt? Check one.

Type of PRIORITY unsecured claim:

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Domestic support obligations
 Taxes and certain other debts you owe the government
 Claims for death or personal injury while you were intoxicated
 Other. Specify _____

Is the claim subject to offset?

No
 Yes

Debtor 1 KRYSYAL J. JOHNSON

Case number (if known) 20-50784**Part 2: List All of Your NONPRIORITY Unsecured Claims****3. Do any creditors have nonpriority unsecured claims against you?**

- No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.

If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2.

Total claim**4.1****\$1,000.00****ACIMA CREDIT**

Nonpriority Creditor's Name

9815 S. MONROE STREET 4th FLOOR

Number Street

Last 4 digits of account number

When was the debt incurred? 2020

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
UNPAID LOAN

SANDY **UT** **84070**
 City State ZIP Code
 Who incurred the debt? Check one.
 Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?
 No
 Yes

4.2**\$1,300.00****AD ASTRA RECOVERY SERVICE**

Nonpriority Creditor's Name

7330 W. 33rd STREET N. SUITE 118

Number Street

Last 4 digits of account number

When was the debt incurred? 2020

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Collecting for - RAPID CASH

WICHITA **KS** **67205**
 City State ZIP Code
 Who incurred the debt? Check one.
 Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?
 No
 Yes

Debtor 1 KRYSYAL J. JOHNSON Case number (if known) 20-50784

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.3 \$3,400.00

AMCOL SYSTEMS INC.

Nonpriority Creditor's Name

P.O. BOX 21625

Number Street

Last 4 digits of account number _____

When was the debt incurred? 2019

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
 Collecting for - MEDICAL BILLS

COLUMBIA SC 29221

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

4.4 \$200.00

CITI CARD/CITI CORP

Nonpriority Creditor's Name

P.O.BOX 6500

Number Street

Last 4 digits of account number _____

When was the debt incurred? 2020

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
 Credit Card

SIOUX FALLS SD 57117

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

4.5 \$300.00

CMRE FINANCE

Nonpriority Creditor's Name

3075 E. IMPERIAL HIGHWAY STE 200

Number Street

Last 4 digits of account number _____

When was the debt incurred? 2019

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
 Collecting for - MEDICAL

BREA CA 92821

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
 Yes

Debtor 1 KRYSTAL J. JOHNSONCase number (if known) 20-50784**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.6****\$600.00****CREDIT COLLECTION SERVICES**

Nonpriority Creditor's Name

P.O. BOX 9134

Number Street

Last 4 digits of account number

When was the debt incurred? 2015

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

NEEDHAM MA 02494

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify
Collecting for - PROGRESSIVE

Is the claim subject to offset?

- No
- Yes

4.7**\$500.00****EVERGREEN PROFESSIONAL RECOVERIES**

Nonpriority Creditor's Name

P.O. BOX 666

Number Street

Last 4 digits of account number

When was the debt incurred? 2020

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

BOTHELL WA 98041

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify
Collecting for - UNITED F.C.U.

Is the claim subject to offset?

- No
- Yes

4.8**\$600.00****FIRST PREMIER BANK**

Nonpriority Creditor's Name

3820 N. LOUISE AVE.

Number Street

Last 4 digits of account number

When was the debt incurred? 2019

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

SIOUX FALLS SD 57107

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify
Credit Card

Is the claim subject to offset?

- No
- Yes

Debtor 1 KRYSTAL J. JOHNSON Case number (if known) 20-50784**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.9** **\$700.00****GREEN ARROW LOANS**

Nonpriority Creditor's Name

P.O. BOX 170

Number Street

Last 4 digits of account number _____

When was the debt incurred? 2019

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

FINLEY CA 95435

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
UNPAID LOAN

Is the claim subject to offset?

- No
 Yes

4.10 **\$600.00****MIDLAND FUNDING**

Nonpriority Creditor's Name

320 E. BIG BEAVER RD. SUITE 300

Number Street

Last 4 digits of account number _____

When was the debt incurred? 2018

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

TROY MI 48083

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Collecting for - CREDIT ONE

Is the claim subject to offset?

- No
 Yes

4.11 **\$500.00****NORTHERN NEVADA MED. CENTER**

Nonpriority Creditor's Name

2375 E. PRATER WAY

Number Street

Last 4 digits of account number _____

When was the debt incurred? 2020

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

SPARKS NV 89434

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Medical Bills

Is the claim subject to offset?

- No
 Yes

Debtor 1 KRYSTAL J. JOHNSON Case number (if known) 20-50784**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.12****\$1,800.00****OPPORTUNITY FINANCIAL, LLC**Nonpriority Creditor's Name
130 E. RANDOLPH ST. #3400

Number Street

Last 4 digits of account number

When was the debt incurred? 2019

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

CHICAGO IL 60601

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
UNPAID LOAN

Is the claim subject to offset?

- No
 Yes

4.13**\$900.00****OXFORD FINANCIAL SERVICES**Nonpriority Creditor's Name
P.O. BOX 93

Number Street

Last 4 digits of account number

When was the debt incurred? 2019

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

SANTA ROSA CA 95402

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
UNPAID LOAN

Is the claim subject to offset?

- No
 Yes

Debtor 1 KRYSTAL J. JOHNSON Case number (if known) 20-50784**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.14****\$1,600.00****PORTFOLIO RECOVERY & AFFILIATES**

Nonpriority Creditor's Name

120 CORPORATE BLVD SUITE 1

Number Street

Last 4 digits of account number

When was the debt incurred? 2018-19

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

NORFOLK VA 23502

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Collecting for -MULTIPLE ACCOUNTS

Is the claim subject to offset?

- No
 Yes

**CAPITAL ONE BANK,
BANK OF MISSOURI****4.15****\$1,700.00****RENO EMERGENCY PHYSICIANS**

Nonpriority Creditor's Name

P.O. BOX 95728

Number Street

Last 4 digits of account number

When was the debt incurred? 2018

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

OKLAHOMA CITY OK 73143

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Medical Bills

Is the claim subject to offset?

- No
 Yes

Debtor 1 KRYSTAL J. JOHNSON

Case number (if known) 20-50784

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.16****\$4,700.00**Nonpriority Creditor's Name
P.O. BOX 30006

Number Street

Last 4 digits of account number

When was the debt incurred? 2019-20

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

RENO NV 89520

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
 Medical Bills

Is the claim subject to offset?

- No
 Yes

4.17**\$1,900.00****RIVERWOOD APARTMENTS**Nonpriority Creditor's Name
805 KUENKLI ST.

Number Street

Last 4 digits of account number

When was the debt incurred? 2020

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

RENO NV 89502

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
 BREACH OF LEASE

Is the claim subject to offset?

- No
 Yes

4.18**\$500.00****SIGMA SOLUTIONS, LLC**Nonpriority Creditor's Name
2180 SOUTH 1300 EAST, STE 650,

Number Street

Last 4 digits of account number

When was the debt incurred? 2020

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

SALT LAKE CITY UT 84106

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
 UNPAID LOAN

Is the claim subject to offset?

- No
 Yes

Debtor 1 KRYSTAL J. JOHNSON Case number (if known) 20-50784**Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page**

After listing any entries on this page, number them sequentially from the previous page.

Total claim**4.19****\$700.00****THE BUREAUS INC.**
Nonpriority Creditor's Name
650 DUNDEE RD. SUITE #370

Number Street

Last 4 digits of account number _____

When was the debt incurred? 2020

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

NORTHBROOK IL 60062

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Collecting for - COMENITY BANK

Is the claim subject to offset?

- No
 Yes

4.20**\$1,000.00****TRIDENT ASSET MANAGEMENT**Nonpriority Creditor's Name
P.O. Box 888424

Number Street

Last 4 digits of account number _____

When was the debt incurred? 2010

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

ATLANTA GA 30356

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Collecting for - CELTIC BANK/INDEGO

Is the claim subject to offset?

- No
 Yes

4.21**\$1,000.00****TRUE ACCORD**Nonpriority Creditor's Name
303 2nd ST. TOWER STE. 750

Number Street

Last 4 digits of account number _____

When was the debt incurred? 2020

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

SAN FRANCISCO CA 94107

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

- Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
UNPAID LOAN

Is the claim subject to offset?

- No
 Yes

Debtor 1 KRYSTAL J. JOHNSON Case number (if known) 20-50784

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only.
 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

	Total claim
Total claims from Part 1	<u>6a. Domestic support obligations</u> <u>6a. \$0.00</u>
	<u>6b. Taxes and certain other debts you owe the government</u> <u>6b. \$0.00</u>
	<u>6c. Claims for death or personal injury while you were intoxicated</u> <u>6c. \$0.00</u>
	<u>6d. Other. Add all other priority unsecured claims. Write that amount here.</u> <u>6d. + \$0.00</u>
	<u>6e. Total. Add lines 6a through 6d.</u> <u>6d. \$0.00</u>

	Total claim
Total claims from Part 2	<u>6f. Student loans</u> <u>6f. \$0.00</u>
	<u>6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims</u> <u>6g. \$0.00</u>
	<u>6h. Debts to pension or profit-sharing plans, and other similar debts</u> <u>6h. \$0.00</u>
	<u>6i. Other. Add all other nonpriority unsecured claims. Write that amount here.</u> <u>6i. + \$25,500.00</u>
	<u>6j. Total. Add lines 6f through 6i.</u> <u>6j. \$25,500.00</u>

Fill in this information to identify your case:

Debtor 1	KRYSTAL	J.	JOHNSON
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>DISTRICT OF NEVADA</u>			
Case number (if known)	<u>20-50784</u>		

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person _____

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X KRYSTAL J. JOHNSON
KRYSTAL J. JOHNSON, Debtor 1

X _____
Signature of Debtor 2

Date 08/14/2020
MM / DD / YYYY

Date _____
MM / DD / YYYY